COUNTY WELFARE DEPARTMENT

HOUSEHOLD ISSUANCE RECORD (HIR CARD) SERIAL NUMBER													
1005	EHOLD) ISSUANCE R	ECORD (HIR CAR	υ)						SERIAL NUMBER		☐ ASSISTANCE ☐ NONASSISTANCE
									TFICATION		'		
PURE	E NA □	MIXED NA ASSISTA	ANCE HOUSEH	HOLD:	AFDC	GA/GR	NAME OF HEAD OF HOUSEHOLD CASE NUMBER						
ATE OF C	ERTIFICATIO	EFFECTIVE (MONTH, YEAR)			E.C.		NAME OF AUTHORIZED REPRESENTATIVE						
ATE NEXT	CERTIFICA	TION DUE					ADDRESS						
							SIGNATURE OF WORKER						
						PAI	RT 2. CO	UPON BA	SIS OF ISSU	ANCE			
DATE (A)		PERSONS COUNT (B)		ADJUSTED NET INCOME (C)			ONTHLY OTMENT pons (D)		SUPPLEMENTAL ALLOTMENT Coupons (E)		INITIALS	REMARKS	
DA	TE	PART 3. PARTICIPATION RECORD NUMBER OF BOOKS ISSUED CASHIER										_	
(A) Month Day		Total Value	\$2 (C)			\$40 \$50 (F) (G)		\$65 (H)	CASHIER 5 INITIAL		REMARKS		RECEIPT SIGNATURE It or Authorized Representative)
WONTH	Бау	(B)	(C)	(0)	\$10 (E)	(F)	(G)	(П)					
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PART 3. PARTICIPATION RECORD (Continued) DATE NUMBER OF BOOKS ISSUED RECEIPT SIGNATURE CASHIER (A) **REMARKS** \$2 (C) \$7 (D) \$10 (E) \$40 (F) \$50 (G) \$65 (H) **Total Value** (Applicant or Authorized Representative) INITIAL Month Day (B)